

## **Group Fitness Class**

Congratulations on your decision to participate in an exercise program! With the help of your personal trainer, you greatly improve your ability to accomplish your training goals faster, safer, and with the maximum benefit. The details of these training sessions can be used for a lifetime!

In order to maximize progress, it will be necessary to for you to follow program guidelines during supervised training days. Remember, exercise is only part of the health equation. Nutrition, stress management, and sleep are also some of the factors that can play a factor into your health.

During your exercise program, every effort will be made for you to assure your safety. However, as with any exercise program, there are risks, including increased heart stress and the chance of musculoskeletal injuries. In volunteering for this program, you agree to assume responsibility for these risks and waive any possibility for personal damage. You also agree that, to your knowledge, you have no limiting physical conditions or disability that would preclude and exercise program.

By signing below, you accept full responsibility for your own health and well-being and you acknowledge and understand that no responsibility is assumed by the leaders of this program.

It is recommended that all participants do their best to attend the classes/training sessions on a weekly basis.

## **Terms and Conditions**

- 1. Group classes are set up in a circuit style to an interval of set time. The class is designed for the participant to self-modify exercises and/or determine the intensity of the exercise.
- 2. Clients who arrive late will be responsible for a proper warm up before joining the other participants.
- 3. All classes are paid in full at the beginning of the month. Late payments can be subject to a \$10 late fee.
- 4. No refunds will be issued for any reason, including but not limited to non-attendance, acute illness, or missed classes.

Total Investment: \$120 per month

**Method of Payment**: check, cash, Zelle, CashApp.

We wish you the best with your health and fitness goals. We look forward to serving you and seeing you succeed!

Participant Name (print):		
Participant Name (signature):		
Trainer's Signature:	Date:	